PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

JP920020217

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
	TAL CLAIMA		(Columi	nn 1) (Column 2)		TYF	TYPE		OR	SMALL	ENTITY		
TOTAL CLAIMS					10		R	ATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BAS	SIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			10 minus 20=		* 60		×	\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			2 minus 3 =		* 20		X	X43=		OR	X86=	·	
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT		-			45=		OR	+290=		
* If	the difference	e in column 1 is	less than z	ero, enter	"0" in d	0" in column 2		TOTAL		OR	TOTAL	7.70	
		LAIMS AS A	MENDE	D - PART II						J - · ·	OTHER		
		(Column 1)		(Colun	ر وسندس در	(Column 3)	SN	IALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVICE PAID I	BER OUSLY	PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X	9=	,	OR	X\$18=		
AME	Independent	*	Minus	***		=	X	13=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+1	45=		OR	+290=		
	10							OTAL			TOTAL		
		ADDI*	r. FEE	<u> </u>		ADDIT. FEE							
	<u> </u>	(Column 1) CLAIMS		· (Colum		(Column 3)			ADDI-	1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA	RA	TE	TIONAL FEE		RATE	TIONAL FEE	
NDN	Total	*	Minus	##	•	= .	X\$	9=		OR	X\$18=		
AME	Independent	*	Minus	***		= .	X4	3=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							_			000		
							+14			OR	+290=	•	
							ADDIT	OTAL FEE	• • •	OR A	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	•	HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
N D N	Total	*	Minus	**		=	X\$	9=	-	OR	X\$18=		
	Independent	*	Minus	***		=	X4:	3=			X86=		
<u>`</u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
+145=										OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "High st Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR A	TOTAL DDIT. FEE		
II	the "Highest Num	mber Previously Paid ber Previously Paid	id For IN THIS I For" (Total or	SPACE is Ind pender	less than nt) is the	n 3, enter "3." highest number			priate box				